

## **BOARD OF REALTY REGULATION 301 S. PARK, ROOM 498** P.O. BOX 200513 HELENA, MT 59620-0513 (406) 444-2961~ (406) 841-2323 (FAX)

OFFICE USE ONLY:
Change Completion:
Date:Int:

NAME/ADDRESS CHANGE, STATUS CHANGE AND TRANSFER FORM

	Check appropriate boxes Complete all required lines Remit appropriate fee for o		parentheses)	
	CHANGE OF BUSINESS ADDRE (Salespeople under broker supervision automaticall		\$45.00	
	☐ CHANGE OF STATUS TO ACTIVE (1, 3, 4, 6, 7 & 8) ☐ TRANSFER TO A NEW BROKER (1 thru 8)		\$45.00 \$45.00 \$20.00 \$20.00 \$10.00	
	☐ CERTIFIED LICENSE HISTORY			
	☐ REQUEST A DUPLICATE WALL			
	☐ CHANGE OF STATUS TO INACT			
	■ DUPLICATE POCKETCARD		\$ 5.00 No Charge	
	☐ CHANGE OF HOME ADDRESS (	1, 7 & 8)		
	☐ CHANGE OF BUSINESS NAME (	1, 2, 3 & 5)	No Charge	
	☐ CHANGE OF LICENSEE NAME	(1, 3 & 7)	No Charge	
	☐ RELEASING SUPERVISION OF I	LICENSEE (1, 2 & 5)	No Charge	
	☐ CANCELLATION OF LICENSE (	(1 & 7)	No Charge	
		TOTAL AMOUNT	REMITTED \$	
1	Licensee's Name	License Number	Home Phone No	umber
1.	Licensee's Name  Current Broker or Business Name	License Number  License Number	Home Phone No	
1. 2. 3.			Business Phone	
2.	Current Broker or Business Name	License Number	Business Phone	e Number
2.	Current Broker or Business Name  New Broker or Business Name	License Number	Business Phone	e Number
2.	Current Broker or Business Name  New Broker or Business Name  New Broker or Business Address	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number
2.	Current Broker or Business Name  New Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY,	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip
2. 3. 4.	Current Broker or Business Name  New Broker or Business Name  New Broker or Business Address	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number
2.	Current Broker or Business Name  New Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY, Current Broker or Releasing Brokers Signature	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip  Date
<ol> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	Current Broker or Business Name  New Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY,	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip
2. 3. 4.	Current Broker or Business Name  New Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY, Current Broker or Releasing Brokers Signature	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip  Date
2. 3. 4. 5. 6.	Current Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY, Current Broker or Releasing Brokers Signature  New Broker Signature	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip  Date  Date
<ol> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> </ol>	Current Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY, Current Broker or Releasing Brokers Signature  New Broker Signature	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip  Date  Date
2. 3. 4. 5. 6.	Current Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY, Current Broker or Releasing Brokers Signature  New Broker Signature  Licensee's Signature	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip  Date  Date
<ol> <li>2.</li> <li>3.</li> <li>4.</li> <li>5.</li> <li>6.</li> </ol>	Current Broker or Business Name  New Broker or Business Address  ORIGINAL SIGNATURES ONLY, Current Broker or Releasing Brokers Signature  New Broker Signature  Licensee's Signature	License Number  Trust Account Number  City	Business Phone Business Phone State	e Number e & Fax Number  Zip  Date  Date

For this service the Business Standards Division now accepts credit card payments using either Master Card or Visa or an electronic check (please do not send cash). You may fill in the appropriate form below to submit payments. This document will be destroyed after the payment is processed. For a complete list of services for which the division accepts credit card payments or e-checks, please see: http://www.realestate.mt.gov. Master Card Amount to be billed: Credit Card # **Expiration Date:** Name on Card: Important: This transaction will appear on your credit card statement as: Discoveringmontana-SC E-Check Information Name (First, Last):\_\_\_\_\_ Sample U.S. Check Name of Bank:\_\_\_\_ Routing Number:\_\_\_ \*:251101001\*: 2711702645W 2121 Account Number: \_\_\_ Routing Number Account Number Check # Amount to be billed: 253301001 2733702645 5151

Important: This transaction will appear on your bank statement as an electronic transaction with the

words: Montana Interact BSD-VT.